

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101561702

FILING DATE

12.22.05

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| TOTAL IND. | 2 | | 2 | | | |
| TOTAL DEP. | 21 | | 18 | | | |
| TOTAL CLAIMS | 23 | | 20 | | | |

| | AS FILED | | AFTER 1 st AMENDMENT | | AFTER 2 nd AMENDMENT | |
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| TOTAL IND. | | | | | | |
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BEST AVAILABLE COPY

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